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EXHIBIT O

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IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

JAMES JIRAK AND ROBERT PEDERSEN,)
PLAINTIFFS,	(
VS.) NO. 07 C 3626
ABBOTT LABORATORIES, INC.,) Judge Castillo
DEFENDANT.) Magistrate Judge Keyı

THE VIDEOTAPE DEPOSITION UPON ORAL EXAMINATION OF
JOANNE KOTMEL, A WITNESS PRODUCED AND SWORN TO BEFORE ME,
AMY L. HOOTEN, CSR, RMR, A NOTARY PUBLIC AT LARGE IN AND
FOR THE STATE OF INDIANA, TAKEN ON BEHALF OF THE
DEFENDANT, AT THE HOLIDAY INN, 4101 HIGHWAY 41 NORTH,
EVANSVILLE, VANDERBURGH COUNTY, INDIANA, ON THE 15TH DAY
OF SEPTEMBER, 2009, COMMENCING AT THE HOUR OF 9:01 A.M.,
PURSUANT TO THE FEDERAL RULES OF CIVIL PROCEDURE AND WITH
WRITTEN NOTICE AS TO TIME AND PLACE.

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ambiguous. Do you understand what she's asking?

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- your sales when you are in another country --
- ² Q. Okay.

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- A. -- to a performance review point.
 - Q. Okay. And prior to being placed on a performance review, was there anything else that you thought that Abbott did wrong?
 - A. Oh, yeah. We would go to training and we would literally have to sit there and, I mean, we called it like the robot training, where they would have these model sales calls and you would have to memorize the sales call. You would have to present it in the field. We looked like idiots.

I will go on record to anybody, we looked like idiots. We had to memorize it, and the people who memorized it the best, you will see, I can play the game, I came across, I had never done it before, all of the dates are in there. Like I would go up to training and they would be like, wow, Jo Anne really did a good job with saying exactly like we wanted her to.

So then there would be someone who would come out in marketing, and they would do a field travel with me, and then they would praise me, you say everything like we want you to. Now we're

- Q. But -- but did you complain yourself to anyone?
- A. I am going to say, yes, I communicated on a regular basis with my immediate supervisors.

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- Q. Okay, so your supervis- -- how did you communicate it to your supervisors?
- A. They knew, you know, that it was as the physicians are laughing. I mean, when we would take a physician and myself would go in to make a call and we would pre-call plan per the company what to say, how to say it, and you would go in and you would regurgitate the pre-call plan, and when the doctor would laugh right in your face, you know, then we would come back and go so how do you think that call went?

And the manager would be like, well, you know, that was -- what do you think we could do better in that call? I mean, it was -- there was -- it was almost laughter, it was almost a comical communication of what we were doing from all people.

I mean, our managers in a breakout would literally say I know this isn't real world, but this is what Abbott wants us to do. That -- that statement was said a lot.

Biaxin, Biaxin XL, then Omnicef.

- Q. Okay. And when you started promoting all of these drugs, how were you trained about the drug?
- A. Various ways. We would be sent booklets, like home study. We would go, we would fly to training, like corporate trainings. We took modules and testing online. I know we took tests also in writing, like written tests, but we also took online tests.

We had to be certified and then we had our district managers had to certify us in a field visit to make sure that we were verbalizing what they wanted us -- what we had just learned.

- Q. Okay. And how long did it take you to get up to speed for a particular drug on average?
- A. Definitely every drug is very different to start.

 I think to make an accurate statement, going from one antibiotic, like when I sold Biaxin, moving over to Omnicef, very quickly, a week, two weeks, three weeks, but learning a new disease state, like to learn about thyroid disease, I never got up to speed. It's just a very hard disease state.

When you are talking about Tricor, it takes years and years. There are physicians that

- question to her?
- 2 (WHEREUPON, THE REQUESTED MATERIAL WAS
- READ BACK BY THE COURT REPORTER.)
- A. This -- this plan is not -- that's not the only
- 5 thing we focused on with him. Ceclor was just --
- he wrote Ceclor, he wrote a lot of Ceclor, and so
- that's the reason it was put into this plan.
- Okay. And then for this Jeffrey Hofer?
- 9 A. Hofer.
- Q. Hofer. Increase war chest snacks? Why did you decide to increase war chest -- or what does that
- mean, first of all?
- A. Yeah, war chest is money. Increase money, talk to
- the nurses when in the office. Dr. Hofer is a
- complete no see. Which a no see, to define no see
- is if you go to an office and you ask to speak to
- Dr. Hofer, he will not see you.
- ¹⁸ Q. Okay.
- A. So to see him you have to set up appointments and
- to do that he needs to be eating.
- 21 Q. Okay.
- A. So once again, it's just common sense. None of
- this -- none of this was to move market share.
- This was Abbott put this in place so that we were

So when you've got a team that three

people might have your product or two people might

have your product, it was very important that you

were as efficient as possible.

- Q. So you would work with your teammates in order to figure out what made the most sense in terms of which doctors to visit each day?
- A. Yeah, to get a routing, so that we were just literally working like a machine.
- 10 Q. Okay.

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- A. You had no flexibility. I mean, you had to hit these calls. If you didn't hit these calls, we would even have to like call the person. I mean, you had no flexibility. You had to do what you were supposed to do every day. And then they were doing the same. That was keeping you -- we had an Indiana week and a Kentucky week.
- Q. Okay. So that you wouldn't run into the same people?
- A. Uh-huh. Uh-huh. Correct.
- Q. Okay. You said that you synced in the morning.
 What do you mean by that?
- 23 A. Just calls, like when you make -- we had various
 24 different computers. I know they changed

be like Omnicef for the treatment of acute maxillary sinusitis by, you know, so and so.

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- Q. Okay. And how would you use these studies during your calls?
- A. Abbott instructed us exactly how to use them. We would open, we would introduce them, you would go over the dosing, name of the study, the author of the study, the publication of the study, hit three points, conclude it.
- O. What are the three points that you would hit?
- A. Within the study, every study was different, but if this one was on the tolerance and tolerability of Omnicef, maybe it was about these patients were very well tolerated, we rehearsed all of this at like our meetings, we would highlight them, these would be the three points that you should go over.

I mean, Abbott prepared us very well. I mean, we were not sent out there not knowing what we were doing. We knew exactly what we were to say to the doctors.

Q. Okay. And these studies, even though you were only highlighting a couple of points with the doctors, would you have to read the entire study in order to understand it for yourself?